



PART B - FEE(S) TRANSMITTAL

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22801 7590 10/25/2004

LEE & HAYES PLLC
421 W RIVERSIDE AVENUE SUITE 500
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01/10/2005 HAL122 00000120 120769 09577118

01 FC:1501 1400.00 DA
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LeAnn M. Sassman

(Depositor's name)

(Signature)

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/577,118	05/23/2000	Matt Odhner	MS1-517US	3081

TITLE OF INVENTION: LOAD SIMULATION TOOL FOR SERVER RESOURCE CAPACITY PLANNING

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	51370 \$1400	\$0	51370 \$1400	01/25/2005
EXAMINER	ART UNIT	CLASS-SUBCLASS			
CRAIG, DWIN M	2123	703-021000			

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Lee & Hayes, PLLC

2

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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Microsoft Corporation

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Redmond, Washington U.S.A.

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

☒ Issue Fee☐ Publication Fee (No small entity discount permitted)☒ Advance Order - # of Copies 2

4b. Payment of Fee(s):

☐ A check in the amount of the fee(s) is enclosed.☐ Payment by credit card. Form PTO-2038 is attached.☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 12-0769 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

Date

Jan. 7, 2005

Typed or printed name

Frederick M. Fliegel

Registration No.

36,138

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